

2007 AmeriCorps FORMS AND INSTRUCTIONS



APPLICATIONS DUE OCTOBER 27, 2006



CALIFORNIA SERVICE CORPS

1110 K Street, Suite 210 ■ Sacramento, CA 95814
(916) 323-7646 phone ■ (916) 323-3227 fax
www.csc.ca.gov

NOTICE FOR APPLICANTS: There are three sources for the documents required to complete an application for 2007 AmeriCorps funding: (1) the 2007 AmeriCorps Forms and Instructions (a Word document), (2) the 2007 AmeriCorps Budget and Budget Narrative (an Excel workbook available at www.csc.ca.gov), and (3) the set of online forms available through the California Service Corps website at www.csc.ca.gov. Please ensure that you have obtained forms from all of the above sources.

FORMS AND INSTRUCTIONS OVERVIEW

Applicants responding to the 2007 AmeriCorps Request for Applications (RFA) must complete a paper application and submit several forms electronically. The electronic and paper portions of the application are both required. To complete your application, you should:

- Download the RFA, Forms and Instructions and Budget and Budget Narrative Forms (available on the CSC website at www.csc.ca.gov). Read and follow the Forms and Instructions.
- Please note that the Forms and Instructions document also contains directions for completing the required online forms.
- Visit the online forms page (accessible at www.csc.ca.gov), create a login name and password, and complete your State Title Pages and your Partnership Forms.
 - Once you have completed and submitted your State Title Pages, you will be sent to a printer-friendly version of your forms. Print these forms and include the hard copies with your paper application. If you would like to edit your State Title Pages after submitting them, you may log in again, make any necessary changes and print another copy. Please discard any earlier forms and include the most recent copy with your application.
 - Do not include hard copies of your Partnership Forms with your paper application. CSC will draw information and produce a report using the electronic data you submitted.
- Before you submit your completed application, please review the Application Checklist included with the Forms and Instructions document.

If you have difficulties or cannot access the online forms, please contact CSC at (916) 322-2210.

2007-08 CALIFORNIA AMERICORPS APPLICATION

NOTICE OF INTENT TO APPLY



1. LEGAL APPLICANT		
Contact Name:		Title:
Organization:		
Address (please do not use P.O. Box):		
City:	State:	Zip Code:
Phone:	Fax:	
Email:	Website:	
2. AMERICORPS PROGRAM		
Name of AmeriCorps Program:		Title:
Program Director Name:		
Organization:		
Address (please do not use P.O. Box):		
City:	State:	Zip Code:
Phone:	Fax:	
Email:	Website:	
3. STATUS	4. ISSUE AREA	5. TYPE OF SERVICE
<input type="checkbox"/> New Applicant <input type="checkbox"/> Recompeting Program <input type="checkbox"/> Planning Grantee <input type="checkbox"/> Experienced Applicant <input type="checkbox"/> Previous Program	<input type="checkbox"/> Education <input type="checkbox"/> Environment <input type="checkbox"/> Health and Other Human Needs <input type="checkbox"/> Public Safety	<input type="checkbox"/> Direct Service <input type="checkbox"/> Volunteer Mobilization Pilot
6. FEDERAL PRIORITIES		
<input type="checkbox"/> Mobilizing Volunteers		<input type="checkbox"/> Engaging Students in Communities
<input type="checkbox"/> Ensuring a Future for Youth		<input type="checkbox"/> Harnessing Baby Boomers' Experience
7. PREFERRED INTERVIEW LOCATION		
<input type="checkbox"/> Bay Area	<input type="checkbox"/> Los Angeles	<input type="checkbox"/> Sacramento

Please complete this form and fax or send CSC **by October 13, 2006:**

California Service Corps
 ATTN: AmeriCorps 2007
 1110 K Street, Suite 210
 Sacramento, CA 95814
 Fax: (916) 323-3227

INSTRUCTIONS: NOTICE OF INTENT TO APPLY

*Applicants are asked to submit a Notice of Intent to Apply to provide information that will assist the California Service Corps (CSC) in its planning efforts (such as arranging for an adequate number of peer reviewers and interview locations). Submission of a Notice of Intent to Apply is **not** an application requirement (e.g., an applicant would not be disqualified if it downloaded the RFA after the deadline for the Notice of Intent to Apply).*

1. *Legal Applicant:* The legal applicant is the organization that takes formal responsibility and assumes liability for the AmeriCorps program.
2. *Name of AmeriCorps Program:* Provide the name of your proposed AmeriCorps program. If the AmeriCorps program director is not the same person as the legal applicant contact, provide contact information for the program director. Otherwise, write "Same as legal applicant" under the "Program Director" field and leave the remainder of Box 2 blank.
3. *Status:*
 - To select one of the five options, double click on the chosen box. Under the "Default Value" section, select "Checked."
 - Check "New Applicant" if neither the legal applicant, nor primary partnering organizations, nor individuals involved in developing the current AmeriCorps application have developed an AmeriCorps application that has been awarded an operating grant by CSC or the Corporation for National and Community Service in the last five years. New applicants are also those in which individuals that were previously employed as core program staff of a funded program (CSC or Corporation), state commission staff, or Corporation staff in the last five years were not involved in the development of the program application.
 - Check "Recompeting Program" if you are a current AmeriCorps program entering the final year of your grant period.
 - Check "Planning Grantee" if you received a 2006 AmeriCorps planning grant from CSC.
 - Check "Experienced Applicant" if you do not meet the definition of a new applicant as described on pages 11-12 of the RFA. For example, if the Grove Unified School District currently operates an AmeriCorps afterschool program, but is submitting this application for a new migrant health AmeriCorps program, it would be considered an experienced applicant.
 - Check "Previous Program" if the program previously received an AmeriCorps operating grant from CSC or the Corporation for National and Community Service in any of the past five program years (2001-02, 2002-03, 2003-04, 2004-05 or 2005-06).
 - For more information on the definition of new applicant, experienced applicant, previously funded programs and recompeting programs, see pages 11-13 of the RFA.
4. *Issue Area:* Check the issue area(s) your program will address. If necessary, check more than one box. Please note that addressing multiple issue areas will not necessarily make your program more competitive.
5. *Type of Service:* Indicate whether your program focuses primarily on direct service or is applying for funding under the Volunteer Mobilization Pilot. For more information on the Pilot, please see pages 27-29 of the RFA.

6. *Federal Priorities*: Check all federal priorities that apply to your program. If appropriate, check more than one box. Please note that addressing multiple priorities will not necessarily make your program more competitive.
7. *Preferred Interview Location*: Programs that compete successfully in the peer review process will proceed to a CSC staff interview. To expedite this process, please indicate your preferred location for a CSC staff interview. The interviews are tentatively scheduled to take place November 27 – December 8, 2006.

INSTRUCTIONS: STATE TITLE PAGES

The State Title Pages are available online through the California Service Corps website at www.csc.ca.gov. CSC strongly recommends that applicants complete their State Title Pages last. Information in the program narrative, budget and budget narrative can be transferred to the State Title Pages. Once you have completed the online forms, please print a hard copy and include it with your application.

1. *Legal Applicant:* The legal applicant is the organization that takes formal responsibility and assumes liability for the AmeriCorps program. Organizations applying for, or have received, federal grant funds, will need to provide a DUNS number. If you do not already have a DUNS number, you may obtain one by calling (866) 705-5711 or visiting the Dun and Bradstreet website at www.dnb.com. Applicants calling (866) 705-5711 can generally obtain a DUNS number on the same day. Obtaining a DUNS number through the Dun and Bradstreet website may take up to one week.
2. *Name of AmeriCorps Program:* Provide the name of your proposed AmeriCorps program. If the AmeriCorps program director is not the same person as the legal applicant contact, provide contact information for the program director. Otherwise, write “Same as legal applicant” under the “Program Director” field and leave the remainder of Box 2 blank.
3. *Application Type:*
 - For more information on the definition of new applicants, experienced applicants, previously funded programs and recompeting programs, see pages 11-13 of the RFA.
 - *Status:* Describe your program’s grant history with CSC.
 - Check “New Applicant” if neither the legal applicant, nor primary partnering organizations, nor individuals involved in developing the current AmeriCorps application have developed an AmeriCorps application that has been awarded an operating grant by CSC or the Corporation for National and Community Service in the last five years. New applicants are also those in which individuals that were previously employed as core program staff of a funded program (CSC or Corporation), state commission staff, or Corporation staff in the last five years were not involved in the development of the program application.
 - Check “Recompeting Program” if you are a current AmeriCorps program entering the final year of your grant period.
 - Check “Planning Grantee” if you received a 2006 AmeriCorps planning grant from CSC
 - Check “Experienced Applicant” if you do not meet the definition of a new applicant as described on pages 10-11 of the RFA. For example, if the Grove Unified School District currently operates an AmeriCorps afterschool program, but is submitting this application for a new migrant health AmeriCorps program, it would be considered an experienced applicant.
 - Check “Previously Funded Program” if the program previously received an AmeriCorps operating grant from CSC or the Corporation for National and Community Service in the past five completed program years (2001-02, 2002-03, 2003-04, 2004-05 or 2005-06).

- If you are a previously funded program, provide the total number of years during which you received AmeriCorps funding through CSC. The years may not necessarily have been consecutive.
4. *Issue Areas:* Check the issue area(s) your program will address. If appropriate, check more than one box. Please note that addressing multiple issue areas will not necessarily make your program more competitive.
 5. *Type of Service:* Indicate whether your program focuses primarily on direct service or is applying for funding under the Volunteer Mobilization Pilot. For more information on the Pilot, please see pages 27-29 of the RFA.
 6. *Legal Applicant Characteristics:* Indicate whether the legal applicant is an institution of higher education or intermediary organization.
 - An intermediary organization provides the mechanism by which a number of community organizations, including faith-based organizations, may access AmeriCorps and other Corporation resources. Intermediaries serve as the legal applicant for funding and agree to provide the technical and financial support to assist community organizations that do not have the capacity to perform these functions. Intermediaries may place individual members at the sites of neighborhood, community or faith-based organizations and assume responsibility for monitoring the progress of the sites.
 - An institution of higher education may be a public or private, two-year or four-year, college or university.
 7. *Program Abstract:* Provide a brief summary (3-4 sentences) of your program. Include information on the community need to be addressed, number and type of AmeriCorps members to be fielded, major service activities and expected impact(s). Your abstract will be included in materials submitted to the CSC Commission's Program Committee and may be disseminated in response to media inquiries.
 8. *Federal Priorities:*
 - Check all federal and state priorities that apply to your program. If appropriate, check more than one box. Please note that addressing multiple priorities will not necessarily make your program more competitive.
 - For each priority checked, supply a brief (1-2 lines) explanation of how your program addresses the priority.
 9. *Budget:*
 - *Total Budget Request:* Provide the total amount of funds that the program is requesting from the Corporation. Transfer this total from Column 4 of the "Total Budget Cost" line on the AmeriCorps Budget Form.
 - *Total AmeriCorps MSYs:* Provide the total number of MSYs (not the total number of members) AmeriCorps members that your program will utilize. You will have this figure after completing the Budget Narrative and AmeriCorps Budget forms.

- *Number of Members*: Provide the total number of AmeriCorps members that your program will utilize. You will have this figure after completing the Budget Narrative and AmeriCorps budget forms.
 - *Cost Per MSY*: Transfer this figure from the “Corporation Cost Per MSY” on the AmeriCorps Budget Form.
10. *Counties With AmeriCorps Member Placements*: List all counties in which your program will place members.

INSTRUCTIONS: EXECUTIVE SUMMARY

Provide a clear overview of the program. Be succinct and as comprehensive as possible. This should include a mission statement for the partnership, a statement of need, expected impact of the program and a summary of the program design. The program design should, at a minimum, summarize how you will achieve the impacts.

Your Executive Summary may not exceed one page. *Type your Executive Summary in Times New Roman, 12-point font size, with one-inch margins. You may single-space your summary.*

Statement of need: The overall purpose of AmeriCorps is to help local communities address critical unmet needs. Provide a description of the critical need that has prompted your partnership to submit an AmeriCorps proposal. Examples: Sometown has a city-wide high school dropout rate of 50%... Only 42% of Sometown's first through third graders read at grade level... Only 2% of the homeless population get assistance in moving to permanent housing... The pollution in the Sometown River has steadily increased over the past 10 years so that fish and other marine animals are no longer able to live in the River.

Mission: Include the mission statement for the partnership (**not** the legal applicant) that is implementing the AmeriCorps program. In this case, we define "mission statement" as a description of the overarching purpose of the partnership. State how the mission of your partnership relates to the identified need(s) above.

Expected impact: Explain what part of the identified need you will address in your proposed AmeriCorps program. For instance, if the need is a soaring rate of high school drop-outs in the city, the expected impact of the program might be to decrease the high school drop-out rate by 10% in two high schools.

Summary of program design: Provide a concise description of your proposed AmeriCorps program. This should include the activities that AmeriCorps members perform to reach the expected impact of the program, as well as member roles in volunteer recruitment and support. The summary of the program design should include a brief description of the overall organizational structure of the program including any sub-grantee(s) and/or member placement sites. You do not need to identify each member placement site.

2007-08 CALIFORNIA AMERICORPS APPLICATION

AMERICORPS ACCOMPLISHMENT AND IMPACT SUMMARY

Program Name: _____

1. Cost Per MSY and Member Information

Program Year	Grant Amount	Cost per MSY	MSY	Awarded Members	Members Enrolled	Members Exited		
						Full Award	Partial Award	No Award
2004-05								
2005-06								
2006-07								

2. Performance Measures

Performance Measure Category		Number (Select One)
<input type="checkbox"/> Needs and Service Activities <input type="checkbox"/> Member Development <input type="checkbox"/> Strengthening Communities		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Year 1 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:	
Year 2 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:	
Year 3 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:	

2006-07 CALIFORNIA AMERICORPS APPLICATION
AMERICORPS ACCOMPLISHMENT AND IMPACT SUMMARY
2. Performance Measures (Continued)

Duplicate as Needed

Performance Measure Category		Number (Select One)			
<input type="checkbox"/> Needs and Service Activities	<input type="checkbox"/> Member Development	<input type="checkbox"/> Strengthening Communities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
Year 1 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:				
Year 2 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:				
Year 3 State the target from the PMW and summarize achievement	[1] End Outcome Target: Achievement: [2] Intermediate Outcome Target: Achievement: [3] Output Target: Achievement:				

INSTRUCTIONS: AMERICORPS ACCOMPLISHMENT AND IMPACT SUMMARY

Programs are advised that previous site visit reports, program progress reports, financial reports, WBRs documentation and member recruitment and retention rates will be reviewed as part of the selection process.

For recompeting programs, summaries will encompass the 2004-05, 2005-06, and 2006-07 program years. For previously funded programs (for a definition of previously funded program, please review the definition on pages 11-13), summaries will encompass the last three years of funding on or after the 2001-02 program year. Those applicants that are previously funded programs or recompeting programs with previous AmeriCorps grants should complete the AmeriCorps Accomplishment Summary forms in the following manner:

1. *Cost Per Members Service Year (MSY) and Member Information*

- *Program Year:* If you are a previous program, change the program years to reflect your last three years of funding on or after the 2001-02 program year.
- *Grant Amount:* Include the grant amount for the program years in question.
- *Cost per MSY:* Provide the contracted cost per MSY.
- *MSY:* Provide the number of member service year (MSY) awarded to your program.
- *Awarded Members:* List the total number of members awarded in your contract for the year in question. For example, in a program that used 40 half-time (900 hour) members, the total MSY would be 20, but the total number of members would be 40.
- *Members Enrolled:* List the total number of members enrolled during the program year.
- *Members Exited*
 - *Full Award:* List the total number of members who successfully exited the program with a full education award.
 - *Partial Award:* List the total number of members who exited with a partial education award.
 - *No Award:* List the total number of members who exited with no education award.

2. *Performance Measures:* For the three most recent years completed, provide the program's performance measure outcome and output targets for up to five performance measures. You may include up to three performance measures in the Needs and Service Activities area, one performance measure in Strengthening Communities and one performance measure in Member Development.

- For each performance measure, identify the category (i.e. Needs and Service Activities, Strengthening Communities, or Member Development) and indicate the number of the performance measure (i.e., 1, 2 or 3). To check a box, double click on the chosen box. Under the "Default Value" section, select "Checked."
- *Performance Measure Target:* State the performance measure target from the performance measure worksheet (PMW) for each category. Enter "N/A" if you did not have a target (i.e. you may not have identified an intermediate outcome – in that case, enter "N/A" next to Intermediate Outcome Target).
- *Achievement:* Provide data on the program's progress toward the performance measure target. Provide only that data which pertains **directly** to the accompanying performance measure target. Please indicate the program year for which you are providing data (i.e., 2003-04, 2004-05, etc.).

INSTRUCTIONS: AMERICORPS PROGRAM NARRATIVE

If you are unable to include any element listed in the 2007-08 AmeriCorps RFA as part of your program, either because of your program model, or for any other reason, please include an explanation in the appropriate section of your application. Your explanation will be considered during the application review process.

Applicants are free to include tables and charts in their proposals. CSC has found that in the past, many applicants have effectively and concisely conveyed information through the use of such visual aids.

The 2007-08 AmeriCorps performance measure worksheets will provide information on specific targets and data used to measure progress toward program goals. Your narrative will include additional details and an expanded description of your program. Peer reviewers and CSC staff will use all of this information to evaluate your application

Your AmeriCorps Program Narrative may not exceed 25 pages. Any charts or graphs included in the narrative count towards this page limit. Other forms required as part of the application, including the executive summary and performance measure worksheets, are not counted against the 25 page limit. *Type and double-space your AmeriCorps Program Narrative in Times New Roman, 12-point font size, with one-inch margins.*

PROGRAM DESIGN

Needs and Service Activities (CSC recommends approximately 6 pages)

Before you complete this section, carefully review Needs and Service Activities in the 2007 AmeriCorps RFA (pages 21-24). The guidelines provide specific information that will help you to address the topics below.

- ***Compelling Community Need***
 - Describe the compelling community need(s) that your program will address.
 - Include a well-documented, compelling description of the need(s) in the communities you intend to serve. *Provide local data (city, county, or state) that matches the area to be served.* Avoid needs statements and statistics that document the larger community. For example, a mentoring program seeking to address academic performance and truancy should not include data on a community's poverty and unemployment rate.
 - Describe how the needs were identified.
 - Describe how you involved the target communities in identifying community needs and the planning process for your program. Be specific in describing their roles and responsibilities and how they will be involved in the ongoing implementation of the program.
 - Describe the gap in services that justify the need for additional resources, such as AmeriCorps. Describe why AmeriCorps members, and not existing staff or other community volunteers, are an appropriate strategy to address the identified need.

- ***Description of Service Activities and Member Roles***
 - Describe the proposed member activities and roles that relate to the need your program will address. Your description should discuss the frequency, duration and intensity of service activities.
 - *Every major direct service activity should be quantified in the need statement and have a corresponding performance measure.*
 - Include information on service activities' relationship to best practices (i.e., scientifically-based tutoring strategies and curricula, mentoring practices, research models, etc.).
- ***Measurable Outputs and Outcomes***
 - Your performance measure worksheets will contain detailed information on the data to be collected, indicators, etc. In your narrative, briefly summarize the outcomes you expect to achieve through your proposed member service activities and their impact on the community need.

Member Development (CSC recommends approximately 6 pages)

Before you complete this section, carefully review Member Development in the 2007 AmeriCorps RFA (pages 29-31). The guidelines provide specific information that will help you to address the topics below.

- ***Member Recruitment***
 - Describe your plans to actively seek a diverse corps (including people of different faiths, races, ethnicities, education levels, socioeconomic backgrounds, physical and mental abilities) that is reflective of the communities to be served.
 - Describe the qualifications, characteristics and desired backgrounds of your members. Also include information on the number and type (tutor, afterschool coordinator, mentor, etc.) of member positions.
 - Plans should take into account different member positions. For example, the recruitment pool for 450 hour tutors and 1,700 hour afterschool coordinators would be different. A program using both should describe plans for both positions.
 - **Tutoring programs:** Describe how your strategy for recruiting and selecting members complies with AmeriCorps requirements for member tutoring qualifications (for more information, see pages 21-22 of the RFA).
 - Please provide justification if you are requesting fewer than 20 MSY. For more information on minimum program size, please see page 15 of the RFA.
- ***Member Training***
 - Describe your member orientation, as well as initial, site specific and ongoing training.
 - Include details such as timeline, length of training, training providers and key topics. Identify any specific training curricula and materials that you will use in orienting and/or training your members.
 - **Tutoring programs:** Explain how your member training plans are consistent with AmeriCorps requirements for member tutor training (for more information, see page 21-22 of the RFA).
 - **Ethic of Service and Civic Responsibility:** Describe your plans to incorporate training and service activities (including structured opportunities for members to reflect on and learn from their service experience, as appropriate) to develop a lifelong ethic of service and civic responsibility among your members.

- **Member Support**
 - Describe your plan for supervising and supporting members. Include information on supervisors and their availability to troubleshoot problems, plans to assess member progress and well-being on a regular basis, opportunities for regular member interaction, etc.
- **Member Retention and Recognition**
 - Discuss how you will retain members in your program and promote their successful completion of a term of service. Include information on specific rewards, incentives (opportunities for skill-building and professional development, educational opportunity or benefit, etc.) and recognition efforts.

Strengthening Communities (CSC recommends approximately 4-5 pages)

Before you complete this section, carefully review Strengthening Communities in the 2007 AmeriCorps RFA (pages 25-29). The guidelines provide specific information that will help you to address the topics below.

- **Volunteer Recruitment**
 - Describe how the program will use volunteers to expand its reach in the community. Include information on volunteer roles and activities. Volunteer activities should address the identified community need.
 - Describe member roles in recruiting and supporting community volunteers, including long-term volunteers. Include the percentage of time members will devote to volunteer recruitment and support activities.
 - If you are requesting a waiver of the volunteer recruitment requirement, provide an explanation for your request. Waivers will only be granted in rare circumstances.
- **Community Partnerships**
 - Describe the extent to which your program will build on (without duplicating), and will reflect collaboration with, other community organizations as well as other national and community service programs supported by the Corporation.
 - **Higher Education Institutions:** Describe your institution's efforts to support community service under Federal Work Study (FWS). Include the percentage of your institution's 2005-06 FWS funds that were used for community service placements and your plans for further efforts in this area.
- **Sustainability**
 - Briefly describe ways in which the impact of your program in the community may be sustainable beyond the presence of federal support. Examples include diversifying the program's funding base, increasing role for volunteers, additional community investment, etc.
- **Capacity Building**
 - Describe member roles in capacity building activities, if applicable.

ORGANIZATIONAL CAPABILITY (CSC recommends approximately 8 pages)

Before you complete this section, carefully review the 2007 AmeriCorps RFA.

- ***Ability of Legal Applicant to Provide Sound Programmatic and Fiscal Oversight***
 - Provide a brief history of the legal applicant, the year it was established, and its experience in the proposed areas of activity.
 - Describe the legal applicant's experience, if applicable, operating and overseeing a program comparable to the one being proposed. Include specific examples of prior accomplishments and outcomes.
 - Describe the legal applicant's capacity to manage a federal grant, including elements of its fiscal system, such as staff dedicated to financial operations as well as written policies regarding procurement, cost allocation, and personnel expenses.
- ***Track Record of Accomplishment in the Proposed Activity Area***
 - Provide a brief summary of your program partnership, including when it was established, governance structure, and key accomplishments in the proposed activity areas.
- ***Well-defined Roles for Staff and Administrators***
 - Describe the organizational structure of your program, including key program staff and your partnership's involvement in the daily operations of the program.
 - Provide a brief summary of the name, title, and experience for key program staff members or your plans to recruit, select, train, and support key staff members, if necessary.
- ***Ability of Program Partnership and/or Intermediary to Provide Sound Programmatic and Fiscal Oversight***
 - Describe the process for selecting, supporting, and monitoring of member placement sites. Describe the process for selection (including screening for programmatic and relevant fiscal capacity), current relationships (programmatic and funding), plans for monitoring compliance with fiscal and programmatic requirements (meetings, training, site visits, etc.), and how you will develop connections among sites through common elements and/or activities to ensure common mission and vision.
- ***Plans or systems for self-assessment, evaluation, and continuous improvement***
 - Briefly describe plans for continuous program improvement (i.e., how will the partnership identify strengths and weaknesses, resolve problems, and gather feedback from and provide feedback to members, service sites, and partners).
 - Describe your partnership's plans for tracking and evaluating progress towards meeting performance measures. Describe your data collection system, including relationships with member placement sites such as schools.
 - Describe how your partnership will use performance measure data, as well as staff, partnership, and community stakeholder feedback, to continuously improve your program.
 - Describe your plans to provide or secure any needed technical assistance for your program, and if applicable, your member placement sites.

COST-EFFECTIVENESS AND BUDGET ADEQUACY (CSC recommends 1 page)

- ***Diverse Non-Federal Support (Matching Funds)***
 - Describe how your program has, or will obtain, diverse non-federal resources for program implementation and sustainability. Include any commitments that you have already obtained, additional commitments you plan to secure, and how you will secure them (including timeline and status of such plans).
 - **Current programs:** Describe your successes in securing match resources for prior grant awards, including the current grant cycle, and, if applicable, previous awards. Describe your plans to improve upon previous challenges in this area.
- ***Decreased Reliance on Federal Support***
 - **Current programs:** Describe the extent to which you are increasing your share of costs to meet or exceed program goals, or the extent to which you are proposing deeper impact or broader reach without a commensurate increase in federal funds.
- ***Budget Adequacy***
 - Briefly describe how the proposed budget (Corporation funds and matching funds combined) meets core program needs, including staffing, member training and support, evaluation, etc.

2007-08 CALIFORNIA AMERICORPS APPLICATION

PRIMARY Needs and Service Performance Measurement Worksheet

Program: _____ PM Title: _____ Program State Date: _____



YES this is the Primary Needs and Service PMW

Note: The Primary PMW is the one where members spend most of their hours. The Primary PMW must be fully aligned—output, intermediate outcome, and end outcome.

Creating Performance Measures		OUTPUT	INTERMEDIATE OUTCOME	END OUTCOME
1	Need. Describe the community need this PM addresses. <u>Do not include</u> activity, members, or numbers. Include evidence of need [reports, statistics, etc.]			
2	Identify the Result you expect to achieve. This is a short pithy statement [i.e., Increase academic skills; or Increase recycling awareness, etc].			
3	Indicator —what will you <u>look at</u> to gauge progress toward your result? THIS IS NOT THE INSTRUMENT!!!	The number of	The percent of	The percent of
4	Amount of Service--answer each of the questions for a. thru e. These numbers apply only to this PMW. Please do not change the format.	a. # of Members: _____ d. Duration or Interval: _____ b. Hours per day: _____ e. Total member hours for this activity: _____ c. Days per week: _____		
5	Participant information—provide information for a thru c. Describe how you select beneficiaries to receive your services—who or what will receive service.	a. # of direct beneficiaries: _____ b. Target population: c. Describe the participant/beneficiary selection process:		
6	Activity --Describe how your members will achieve the result. Explain exactly what members will be doing. Give a clear picture of member activity. Do not repeat information already provided in this PMW.			
7	Measurement--What data and instruments will be used to measure indicators? Indicate (for <u>each</u> instrument) the <u>name</u> of the instrument and what data it will collect EACH indicator listed in #3 needs to have an instrument	[1] _____ - to collect data on _____	[1] _____ - to collect data on _____	[1] _____ - to collect data on _____
8	State the targets that you expect to meet on this PM for each of three years. EACH instrument listed in #7 needs 3 targets.	Output Targets are simple tallies and counts Year 1: Year 2: Year 3:	Outcomes Targets have 3 components: [1] % of people/things that changed [2] What changed [3] Amount of the change Year 1: Year 2: Year 3:	Outcomes Targets have 3 components: [1] % of people/things that changed [2] What changed [3] Amount of the change Year 1: Year 2: Year 3:
9	If you have data for this performance measure from prior years, report it here. We are not looking for a data dump. We are looking for your previous performance in this area.			

2007-08 CALIFORNIA AMERICORPS APPLICATION

NON-PRIMARY Performance Measurement Worksheet

Program: _____ PM Title: _____ Program State Date: _____

Select a performance measure category for this Worksheet. <input type="checkbox"/> NEEDS & SERVICE ACTIVITIES <input type="checkbox"/> MEMBER DEVELOPMENT <input type="checkbox"/> STRENGTHENING COMMUNITIES		
<input type="checkbox"/> NO this is NOT the Primary PMW		
OUTPUT		END OUTCOME
Creating Performance Measures		
1	Need. Describe the community need this PM addresses. Do not include activity, members, or numbers. Include evidence of need [reports, statistics, etc.]	
2	Identify the Result you expect to achieve This is a short pithy statement [i.e., Increase academic skills; or Increase recycling awareness, etc).	
3	Indicator —what will you look at to gauge progress toward your result? THIS IS NOT THE INSTRUMENT!!!	The percent of
4	Amount of Service —answer each of the questions for a. thru e. These numbers apply only to this PMW. Please do not change the format.	a. # of Members: _____ b. Hours per day: _____ c. Days per week: _____ d. Duration or Interval: _____ e. Total member hours for this activity: _____
5	Participant information—provide information for a thru c. Describe how you select beneficiaries to receive your services—who or what will receive service.	
6	Activity --Describe how your members will achieve the result. Explain exactly what members will be doing. Give a clear picture of member activity. Do not repeat information already provided in this PMW.	
7	Measurement --What data and instruments will be used to measure indicators? Indicate (for each instrument) the name of the instrument and what data it will collect EACH indicator listed in #3 needs to have an instrument	[1] _____ - to collect data on _____ [1] _____ - to collect data on _____
8	State the targets that you expect to meet on this PM for each of three years. EACH instrument listed in #7 needs 3 targets.	Outcomes Targets have 3 components: [1] % of people/things that changed [2] What changed [3] Amount of the change Year 1: Year 2: Year 3:
9	If you have data for this performance measure from prior years, report it here.	

2007-08 CALIFORNIA AMERICORPS APPLICATION

[REQUIRED] Common Strengthening Communities PWM

Program: _____ PM Title: Volunteer Recruitment Program State Date: _____

<input checked="" type="checkbox"/> NO this is NOT the Primary PMW Select a performance measure category for this Worksheet. <input checked="" type="checkbox"/> STRENGTHENING COMMUNITIES		
Creating Performance Measures	OUTPUT—<i>output is mandatory</i>	END OUTCOME - <i>optional</i>
1	REQUIREMENT	
2	Identify the Result you expect to achieve This is a short pithy statement [i.e., Increase academic skills; or Increase recycling awareness, etc). <i>Recruit volunteers for community service</i>	
3	Indicator —what will you <u>look at</u> to gauge progress toward your result? THIS IS NOT THE INSTRUMENT!!! <i>[1] The number of volunteers recruited for <u>on-going</u> activities</i> <i>[2] The number of volunteers recruited for <u>one-time</u> activities</i> <i>[3] The number of <u>on-going</u> volunteers hours served</i> <i>[4] The number of <u>one-time</u> volunteers hours served</i>	
4	Amount of Service--answer each of the questions a. thru e. These numbers apply only to this PMW. Please do not change the format. a. # of Members: _____ d. Duration or Interval: _____ b. Hours per day: _____ e. Total member hours for this activity: _____ c. Days per week: _____	
5	Participant information a. Target population to recruit: <i>Baby boomers, seniors,</i> _____	
6	Activity --Describe how your members will recruit volunteers. Explain exactly what <u>members</u> will be doing. Give a clear picture of member activity. Do not repeat information already provided in this PMW. Sample Text --Members will recruit volunteers to service in both on going and one-time community project opportunities. Members' recruitment will include activities such as: information booths; health fairs; presentations/outreach at schools, fraternities, sororities, businesses, churches, universities, local sporting events, _____; phone calls to interested organizations and individuals to set-up opportunities. Member will also inform volunteers of the California Volunteer Matching Network—see page 63 of RFA	
7	Measurement --What data and instruments will be used to measure indicators? Indicate (for <u>each</u> instrument) the <u>name</u> of the instrument and what data it will collect EACH indicator listed in #3 needs to have an instrument <i>[1] Volunteer Log- to collect data on # of volunteers recruited for <u>on-going</u> activities</i> <i>[2] Volunteer Log to collect data on # of volunteers recruited for <u>one-time</u> activities.</i> <i>[3] Volunteer Log to collect data on # of volunteer hours for <u>on-going</u> activities.</i> <i>[4] Volunteer Log to collect data on # of volunteer hours for <u>one-time</u> activities.</i>	
8	State the targets that you expect to meet on this PM for each of three years. EACH instrument listed in #7 needs 3 targets. Year 1: <i>[1] XXXX volunteers recruited for <u>on-going</u> activities.</i> <i>[2] XXXX volunteers recruited for <u>one-time</u> activities.</i> <i>[3] XXXX volunteer hours for <u>on-going</u> activities.</i> <i>[4] XXXX volunteer hours for <u>one-time</u> activities.</i> Year 2: <i>[1] XXXX volunteers recruited for <u>on-going</u> activities.</i> <i>[2] XXXX volunteers recruited for <u>one-time</u> activities.</i> <i>[3] XXXX volunteer hours for <u>on-going</u> activities.</i> <i>[4] XXXX volunteer hours for <u>one-time</u> activities.</i> Year 3: <i>[1] XXXX volunteers recruited for <u>on-going</u> activities.</i> <i>[2] XXXX volunteers recruited for <u>one-time</u> activities.</i> <i>[3] XXXX volunteer hours for <u>on-going</u> activities.</i> <i>[4] XXXX volunteer hours for <u>one-time</u> activities.</i>	
9	If you have data for this performance measure from prior years, report it here. _____	

2007-08 CALIFORNIA AMERICORPS APPLICATION

SAMPLE PRIMARY Needs and Service Performance Measurement Worksheet

Program: *Clay AmeriCorps*

PM Title: *Mentoring*

Program State Date: 10/1/07

☒ **YES** this is the Primary Needs and Service PMW

Note: The Primary PMW is the **one** where members spend most of their hours. The Primary PMW must be fully aligned—output, intermediate outcome, and end outcome.

Creating Performance Measures		OUTPUT	INTERMEDIATE OUTCOME	END OUTCOME
1	Need. Describe the community need this PM addresses. <u>Do not include</u> activity, members, or numbers. Include evidence of need [reports, statistics, etc.]	<i>Clay Middle School has experienced a 15% increase in disciplinary referrals in the 2005-06 year--referrals for chronic truancy, fighting, threatening behavior to students/staff, substance abuse, or other delinquent behaviors. During 2005, the principal organized a group of parents, teachers, and district staff to research best practices, design activities, and implement after school activities and awareness sessions to reverse the trend. To implement the program, the school needs to have trained people who can act as mentors in the after school program.</i>		
2	Identify the Result you expect to achieve. This is a short pithy statement [i.e., Increase academic skills; or Increase recycling awareness, etc].	Youth will participate in <i>after school</i> activities	Youth will increase appropriate social and behavioral skills	Youth will decrease disciplinary referrals.
3	Indicator —what will you look at to gauge progress toward your result? THIS IS NOT THE INSTRUMENT!!!	<i>The number of student who participate in the after school program</i>	<i>The percent of students who increase appropriate social and behavioral skills</i>	<i>The percent of students who decrease disciplinary referrals</i>
4	Amount of Service--answer each of the questions for a. thru e. These numbers apply only to this PMW. Please do not change the format.	a. # of Members: 4 b. Hours per day: 4 c. Days per week: 5. d. Duration or Interval: 32 weeks e. Total member hours for this activity: 2560		
5	Participant information—provide information for a thru c. Describe how you select beneficiaries to receive your services—who or what will receive service.	a. # of direct beneficiaries: 20 b. Target population: <i>5th and 6th graders identified as at-risk of disciplinary referral or expulsion</i> c. Describe the participant/beneficiary selection process: <i>Participants will be referred to the program by the vice principal</i>		
6	Activity --Describe how your members will achieve the result. Explain exactly what members will be doing. Give a clear picture of member activity. Do not repeat information already provided in this PMW.	<i>Members will work in regular after school program [serving 67 youth] mentoring 20 youth [mentees]. Members will work with mentees to identify challenging areas & options for improvement—they will use the "Youth Assessment Rubric" to assess problem areas. Members will work with the whole group in activities such as: homework help, recreation activities, service projects, drama/role playing, and arts/culture to build & encourage leadership, tolerance, anger management, team work, cooperation, & patience. Members will use "normal" situations to mentor & model behaviors & actions. Members will meet with mentees 1:1 at least 1 hour per week. Mentees will be assessed 3x per year & will participate in assessing progress & challenges.</i>		
7	Measurement--What data and instruments will be used to measure indicators? Indicate (for each instrument) the <u>name</u> of the instrument and what data it will collect	[1] Attendance Log to collect data on number of students	[1] Youth Assessment Rubric to collect data on improved social and behavioral skills.	[1] Vice Principal Report to collect data on student's school behavior
8	State the targets that you expect to meet on this PM for each of three years. EACH instrument listed in #7 needs 3 targets.	Output Targets are simple tallies and counts Year 1: 20 youth will be mentored Year 2: 25 youth will be mentored Year 3: 30 youth will be mentored	Outcomes have 3 components: [1] % of people/things that changed, [2] What changed, & [3] Amount of change Year 1: 70% of youth will increase rubric score by one level in 3 of 5 categories Year 2: 70% of youth will increase rubric score by one level in 3 of 5 categories Year 3: 70% of youth will increase rubric score by one level in 3 of 5 categories	Outcomes have 3 components: [1] % of people/things that changed, [2] What changed, & [3] Amount of change Year 1: 65% of youth will decrease behavioral incidences by 50% Year 2: 65% of youth will decrease behavioral incidences by 50% Year 3: 65% of youth will decrease behavioral incidences by 50%
9	If you have data for this performance measure from prior years, report it here.	This is a new performance measure	This is a new performance measure	This is a new performance measure

INSTRUCTIONS: PERFORMANCE MEASUREMENT WORKSHEET

Performance measure requirements are as follows:

General

- Applicants must develop a set of performance measures worksheets (PMW) that account for all of member service hours.
- Applicants must develop member development PMWs that account for 20 percent of member hours.
- Applicants must develop needs and service and strengthening communities PMWs that account for 80 percent of member hours. For more information on member service activities, see pages 19-24 of the RFA.

Needs and Service Activities

- Applicants must develop a fully aligned PMW for their primary needs and service activity. A *fully aligned* PMW includes an end outcome, intermediate outcome, and output. The *primary needs and service activity* is the member service activity to which the greatest number of member hours (cumulative across the program) is dedicated.
- All non-primary needs and service PMW (including activities other than the primary service activity) must contain an end outcome and an output.
- CSC strongly encourages applicants to develop outcome performance measures that focus on lasting change directly related to the identified community need. For more information on performance measures, see pages 40-43 of the RFA.

Member Development

- Applicants are required to develop one member development PMW that includes one end outcome and one output. CSC expects that the end outcome reflect direct member training – and specifically focus on areas such as: member work skills or performance, recognized certifications earned, or improved life skills.
- Applicants may develop additional member development PMWs as appropriate to program design.
- Member development activities are not to exceed 20% of total member hours.

Strengthening Communities

- All applicants must complete the **REQUIRED Common Strengthening Communities Performance Measurement Worksheet**. All programs are required to recruit volunteers.
- Applicants proposing that members engage in community strengthening activities beyond volunteer recruitment and/or support requirement must develop/expand the PMW to include an outcome and output.
- National Days of Service events should be captured on a Strengthening Communities PMW.

Each applicant will need to complete at least three Performance Measurement Worksheets (PMW), titled as follows:

- [A] **PRIMARY Needs and Service Performance Measurement Worksheet**—complete only one
- [B] **NON-Primary Performance Measurement Worksheet**—at least one for member development, then as needed to account for member hours
- [C] **[REQUIRED] Common Strengthening Communities PMW**—complete only one

Each worksheet is explained below.

[A] PRIMARY Needs and Service Performance Measurement Worksheet:

Each applicant will fill in the Program name, title of the PMW, and the projected activity start date.

- [1] **Need:** Summarize the community need your partnership has researched and selected. This is the foundation of your PMW. Include evidence as indicated in the RFA.
- [2] **Result:** The result should directly and clear flow from the community need. Write a statement that reflects the result the community desires. This is a brief statement of the desired result (see the sample PMW in this section). Applicants need to identify three result statements—end outcome, intermediate outcome, and output. These three results are required.
- [3] **Indicator:** The indicator is the *thing* you will look at to gauge progress toward the result. It should mirror the result. It is not the instrument. CSC strongly encourages applicants to consider the following when identifying indicators:
 - The output indicator begins with the words: “The number of...”
 - The outcome indicator begins with the words: “The percent of...”Applicants will need to complete each sentence in the PMW. *Tip—frequently, the indicator can be created by combining the “The percent/number of...” phrase, with the result statement (see the sample PMW in this section)*
- [4] **Amount:** these are simple calculations.
 - [a] # of members in this activity
 - [b] # of hours per day for this activity
 - [c] # of days per week for this activity
 - [d] Duration/interval of activity—state the number of days or weeks that this activity runs
 - [e] Total number of member hours for this activity. Calculated by—
[a*b]*[c*d]
- [5] **Participants:** Identify the number of direct beneficiaries of member service, a general description of the beneficiary population, and how participants are selected for your service (see the sample PMW in this section).
- [6] **Activity:** This is a description of exactly what members do. Words like “assist”, “supervise”, “activity” need to be defined. What are members doing when they “assist” a participant?

Tutoring Programs—describe the tutoring strategy, amount of 1:1 time each student will receive, skill/subjects tutored. Remember, tutoring is a sustained relationship over time that focuses on identified deficit academic skills, with skill assessment throughout the program.

Mentoring Programs— describe the mentoring strategy, amount of 1:1 time each student will receive, and types of social/behavioral issues being addressed. Remember, mentoring is a sustained relationship over time that focuses on identified social and/or behavioral skills, with assessment throughout the program.

- [7] **Instrument and Data:** Describe what the program will use to measure your **targets** in step eight. In describing data, applicants should clarify the exact information that will be used in reports. This step should also include a description of the tool used to collect data. Use the format provided in the section to complete this section for each instrument and identify data being collected. Each **indicator** identified in step three needs to have a corresponding instrument.
- [8] **Targets:** Identify the actual level or degree of success – as measured by your instrument – which you expect to achieve each year in the three-year funding cycle. Given that each year brings new AmeriCorps members and service recipients, it is anticipated that years two and three would be predictions of 5-10% growth. CSC views second and third year targets as a vision of your program’s future service delivery. CSC will negotiate final second and third year target during the contracting process for those years. *Example for outcome targets: Year 1: 50% of students tutored increase reading skills by X grade level. Year 2: 55% of students tutored increase reading skills by X grade level. Year 3: 60% of students tutored increase reading skills by X grade level.*
- Outcome targets **MUST** include the **amount** of change (e.g., 3 points, 6 levels, .5 grade levels, earned certification, etc.). Be sure to follow the PMW directions when writing targets (see Sample PMW in this section). Remember, each **instruments** in step seven needs 3 years of targets (see Volunteer Recruitment PMW).
- [9] **Prior Data:** If you have data for the performance measure target include it here. Only include data directly reflective of the target stated.

[B] NON-Primary Performance Measurement Worksheet

This PMW does not include an intermediate outcome. Follow instructions for the **PRIMARY Needs and Service Performance Measurement Worksheet**. The only difference is that an intermediate outcome is not included in the non-primary PMW. For each performance measure, identify the category (i.e., Needs and Service Activities, Strengthening Communities, or Member Development). To check a box, double click on the chosen box. Under the “Default Value” section, select “Checked.”

[C] [REQUIRED] Common Strengthening Communities PMW

This PMW is required for all Applicants. Complete the PMW sections by inserting information specific to your program. Applicants should replace “xxx”, “_____”, and “Sample Text” with their program’s specific text. The end outcome column is optional depending upon your program design.

Please read and follow the directions on the PMW, and in this section. For each PMW, complete the requested steps. CSC recommends that applicants consult the PMW sample as they complete their PMWs.

INSTRUCTIONS: CALIFORNIA LOCAL AREA SERVICE PARTNERSHIP (CLASP) ONLINE FORMS

CLASP forms are available online through the California Service Corps website at www.csc.ca.gov/grants/current_opps.asp. Once you have completed the online forms, you will submit them online to CSC. It is not necessary to include hard copies of the CLASP forms with your application. CSC will draw information from your electronic submission.

Site Placement Information: Indicate whether the partner will serve as an AmeriCorps members placement site. If so, provide information on the number of members, as well as details on their terms of service. For example, if a partner would host a total of 4 half-time (900 hour) members, the CLASP form for that partner would read as follows:

Members Awarded to Site: 4

Number of 900-Hour Members: 4

Partner, Roles, Responsibilities, Resources: Check the appropriate box and provide a brief description of the resources.

INSTRUCTIONS: BUDGET FORM AND BUDGET NARRATIVE FORM

Detailed information included in the Budget Narrative creates the summary Budget Form. Your budget must provide a full explanation of all proposed costs including their purpose, justification, and the basis of your calculations. Where appropriate, present calculations in an equation format, e.g., two (2) staff traveling @ \$350/trip for 2 trips = \$1400; or, salary \$60,000 @ 20% devoted to program = \$12,000.

Overview of Key Statutory and Regulatory Budget Requirements:

- Equipment costs must not exceed 10% of the total Corporation share.
- Administrative costs must not exceed 5% of the total Corporation funds requested.
- Your budget must meet certain minimum match requirements for operating and member support costs:
 - **Sections I & III:** You must match with cash or in-kind contributions at least 33% of the project's total Operating (Section I) plus Administrative (Section III) costs. The acceptable sources of matching funds are federal, state, local, private sector, and/or other funds in accordance with applicable AmeriCorps requirements.
 - **Section II:** You must match at least 15% of all member costs (Section II) with non-federal cash. The matching sources may be state, local, private sector, or other non-federal funds in accordance with applicable AmeriCorps requirements. Other federal funds are not an acceptable source of the required 15% cash match for member costs, except for health care.

Note: Most federal funds are not authorized to be used as match for another federal grant. While the Corporation's legislation may permit the use of non-Corporation federal funds as match for the grantee share of the budget for operating and administrative costs, the determining factor is the other federal agency. You must ensure that your use of another federal agency's funds as match for this national service program grant is permitted by the other agency.

- In each section of the budget, clearly and specifically identify the source and total dollar amount of cash match from private, state and local and federal funds, and the source and total amounts of in-kind support. Define all acronyms the first time they are used to reference non-Corporation programs and sources.
- In addition to the limits on the Corporation and federal shares of funding for each budget section, grantees are required to meet an overall matching rate that increases over time. These matching requirements may be waived in limited circumstances. See 45 CFR §§ 2521.35–2521.90, for the regulatory match and waiver requirements.

Consistency of treatment: For any cost to be allowable under a grant award based on an application for AmeriCorps program funding, the cost must be accorded consistent treatment using policies and procedures that apply uniformly to both the federal grant funded activities and to all other activities of the applicant, including those costs reported in the Grantee Share.

Calculating the Corporation Cost per Member Service Year (MSY) (formerly Cost per Full Time Equivalent (FTE)): One Member Service Year is equivalent to one full-time service period of at least 1,700 hours of service. Calculate the Corporation cost per MSY by dividing the Corporation's share of budgeted grant costs by the number of member service years you are requesting in your grant. Do not include child care or the cost of the education award a member may earn through serving with your program.

For 2007-2008, the maximum Corporation Cost per MSY is \$15,675.

Section I. Program Operating Costs

Complete Section I, Program Operating Costs, of the Budget Worksheet by entering the Total Amount, CNCS Share, and Grantee Share for Parts A-J, as follows:

A. Personnel Expenses

Under Position/Title Description, list each staff position title and provide a brief 5 or 6-word position description, salary, and percentage of effort devoted to this award.

B. Personnel Fringe Benefits

Under Purpose/Description, identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation or rate for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. Include holidays, sick, and vacation leave in the personnel expenses (salary) budget line item. Itemize unusual or exceptionally high-cost benefits.

C. 1. Staff Travel

Describe the purpose of each instance of travel. Provide a calculation to include costs for airfare, transportation, lodging, per diem, and other travel related expenses multiplied by the number of trips/staff. Costs budgeted in this line item cannot exceed the amounts described in the State of California – Department of Personnel Administration Short-term Travel Reimbursement guidelines (<http://www.dpa.ca.gov/jobinfo/statetravel.shtm>). As of July 1, 2006 the mileage reimbursement rate is \$.445 per mile.

Only domestic travel is allowable; other travel is allowable only if specifically identified and approved as a condition of your award.

You must include \$2,000 in this line item for funds to travel to Corporation-sponsored technical assistance meetings:

C. 2. Member Travel

Describe the purpose for which members will travel. Provide a calculation to include costs for airfare, transportation, lodging, per diem, and other related expenses for members to travel outside their service location or between sites. Include costs associated with local travel, such as bus passes to local sites, mileage reimbursement for use of car, etc. in this budget category. Costs budgeted in this line item cannot exceed the amounts described in the State of California – Department of Personnel Administration Short-term Travel Reimbursement guidelines (<http://www.dpa.ca.gov/jobinfo/statetravel.shtm>). As of July 1, 2006 the mileage reimbursement rate is \$.445 per mile.

D. Equipment

Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit (including accessories, attachments, and modifications). Include items that do not meet this definition in **E. Supplies** below. Purchases of equipment are limited to 10% of the total Corporation funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment.

E. Supplies

Include the amount of funds to purchase consumable supplies and materials, including Member Service Gear and equipment that does not fit the definition above. You must individually list any single item costing \$1,000 or more. The maximum cost of member service gear, inclusive of any standard packages which may be offered, is \$35 per member. For programs that require a professional uniform, a collared shirt, the maximum cost is \$70 per member. Programs that require additional safety gear can budget up to an additional \$150 per requested member. Charge all other costs associated with member gear to the grantee share.

F. Contractual and Consultant Services

Include costs for consultants related to the project's operations. Payments to individuals for consultant services under this grant may not exceed \$540 per day (excluding costs for indirect expenses, travel, supplies, etc.). The \$540 daily rate is a ceiling. CSC expects that programs may find consultants who will work below this maximum. Indicate the daily rate for consultants you are proposing to use, describe their contractual services, and provide the names of the organizations when available. Indicate the daily rate, number of days, and total cost. For any pro bono work by a contractor in combination with fee-based work, affirm that the vendor's normal fee schedule and market-based work warrant the in-kind value placed on the donated portion.

G. 1. Staff Training

Include the costs associated with training staff on project requirements and enhancing the skills staff need for effective project implementation, i.e., project or financial management, team building, etc. If using a consultant(s) for training, indicate the estimated daily rate, not to exceed \$540 per day.

G. 2. Member Training

Include the costs associated with training members to carry out their service activities, for example, orientation, project-specific skills such as age-appropriate tutoring, CPR, or ecosystems and the environment. You may also use this section to request funds to support training in Life After AmeriCorps. If using a consultant(s) for training, indicate the estimated daily rate, not to exceed \$540 per day.

H. Evaluation

Include costs for project evaluation activities such as evaluation consultants or purchase of instrumentation. Include staff time or subcontracts you did not budget under Section I A. Personnel Expenses. This cost **does not** include the daily/weekly gathering of data to assess progress toward meeting performance measures, but is a larger assessment of the impact your project is having on the community, as well as an assessment of the overall systems and project design. If using a consultant(s) for evaluation, indicate the estimated daily rate, not to exceed \$540 per day.

I. Other Operating Costs

Allowable costs in this budget category can include when applicable:

- Background checks of members and grant-funded staff who have recurring access to vulnerable populations, i.e., children, the elderly, disabled, etc.
- Office space rental for projects operating without an approved indirect cost rate agreement that covers office space. For national office space, rental may be unallowable; check relevant OMB Circulars. If space is budgeted and shared with other projects or activities, the costs must be equitably pro-rated and allocated between the activities or projects.
- Utilities, telephone, Internet and similar expenses that are specifically used for AmeriCorps members and AmeriCorps project staff, and are not part of the organizations indirect cost/admin cost allocation pool.
- Recognition costs for members. List each item and provide a justification in the budget narrative. Gifts and/or food in an entertainment/event setting are not allowable costs.

J. Source of Match

Enter the total amount of cash and in-kind match under columns for Private, State and/or Local, and Federal in the Source of Match box. Then, for each amount entered, identify the source of the matching funds or in-kind contributions by entering text under Sources. Define any non-Corporation acronyms the first time they are used

2007-08 CALIFORNIA AMERICORPS APPLICATION

BUDGET ANALYSIS CHECKLIST

Complete the checklist below to ensure that you submit an accurate budget narrative and budget that meet AmeriCorps requirements.

In Compliance?	Section I. Program Operating Costs
Yes ___ No ___	Costs charged under the Personnel line item directly relate to the operation of the AmeriCorps project? Examples include costs for staff that recruit, train, place, or supervise members as well as manage the project.
Yes ___ No ___	Staff indirectly involved in the management or operation of the applicant organization is funded through the administrative cost section (Section III.) of the budget? Examples of administrative costs include central management and support functions.
Yes ___ No ___	Staff fundraising expenses are not charged to the grant? You may not charge AmeriCorps staff members' time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses.
Yes ___ No ___	Brief position descriptions are provided for each staff member listed on the grant?
Yes ___ No ___	Funds to pay relocation expenses of AmeriCorps members are not in the federal share of the budget?
Yes ___ No ___	Funds for the purchase of equipment (does not include general use office equipment) are limited to 10% of the total grant amount?
Yes ___ No ___	All single equipment items over \$5000 per unit are specifically listed?
Yes ___ No ___	All single supply items over \$1000 per unit are specifically listed?
Yes ___ No ___	Justification/explanation of equipment items is included in the budget narrative?
Yes ___ No ___	Have the instructions concerning member service gear been followed? If you choose to purchase the standard service gear package, budget \$35.00 per member. If you choose to purchase the collared-shirt, budget between \$35 and \$70 per member. The federal share can be up to \$150 per member for additional safety apparel that is necessary to perform daily service activities. You must include a justification for these additional items in the budget narrative.
Yes ___ No ___	Are all consultant services are budgeted below the maximum federal daily rate of \$540/day?
Yes ___ No ___	Does the budget reflect adequate budgeted costs for project evaluation?
Yes ___ No ___	Are all items in the budget narrative itemized and justified?
Yes ___ No ___	You have included \$2,000 for travel to CNCS-sponsored meetings in the Section I.C Staff Travel of the budget narrative (\$750 for National operating sites, if applicable)?
Yes ___ No ___	Have you provided budgeted costs for background checks of members and grant-funded staff that will have recurring access to vulnerable populations (i.e., children, frail elderly, persons with disabilities)?
Yes ___ No ___	Are all Project Operating Costs matched at least 33% with cash or in-kind contributions?
Yes ___ No ___	Is the total amount of cash and/or in-kind derived from private, state and local, and federal funds stated in the narrative?

In Compliance?	Section II. Member Costs
Yes ___ No ___	Are the living allowance amounts correct? Full-time AmeriCorps members must receive at least the minimum living allowance as indicated in the chart in the budget instructions. Note: Programs in existence prior to September 21, 1993 may offer a lower living allowance than the minimum. If such a program chooses to offer a living allowance, it is exempt from the

	minimum requirement, but not from the maximum requirement. Projects are not required to provide half-time members living allowances, but if they do, they must comply with the living allowance requirements listed in the budget instructions.
Yes ___ No ___	Does the budget provide non-federal cash match for all member costs, except health care? You cannot use other federal funds for the first 15% of match of living allowance, FICA, or worker's compensation.
Yes ___ No ___	Are Member Costs matched at least 15% in cash? If you are budgeting use of work-study funds, there must be an aggregate 15% non-federal share of all member costs.
Yes ___ No ___	Is the federal share of the living allowance for full-time members no more than the amount listed in the chart in the budget instructions? Regardless of the size of the living allowance, the federal share cannot exceed the statutory 85% of the minimum living allowance.
Yes ___ No ___	The federal share of living allowance for half-time members is not more than 85% of half of the minimum living allowance as announced in the <i>Notice</i> and budget instructions? As with full-time members, projects may provide a higher living allowance, but the federal share cannot exceed the amount listed.
Yes ___ No ___	Confirm that Living allowances are not paid on an hourly basis. They may be calculated using service hours and program length to derive a weekly or biweekly distribution amount. Divide the distribution in equal increments that are not based on the specified number of hours served.
Yes ___ No ___	Is FICA calculated correctly? You must pay FICA for any member receiving a living allowance. Unless exempted by the IRS, calculate FICA at 7.65% of the total amount of the living allowance.
Yes ___ No ___	Is the Worker's Compensation calculation correct? Worker's Compensation insurance is required for all members serving in California.
Yes ___ No ___	Health care is provided for qualified full-time AmeriCorps members only (unless half-time serving for a sustained full-time period of time such as summer service)? If your project chooses to provide health care to other half-time members, you may not use federal funds to help pay for any portion of the cost. Projects must provide health care coverage to all full-time members who do not have adequate health care coverage at the time of enrollment or who lose coverage due to participation in the project. In addition, projects must provide coverage if a full-time member loses coverage during the term of service through no deliberate act of his/her own.

In Compliance?	Section III. Administrative/Indirect Costs
Yes ___ No ___	Applicant has chosen Option A – Corporation fixed percentage method and the maximum federal share of administrative costs does not exceed 5% of the total federal funds budgeted? To determine the federal administrative share, multiply all other budgeted federal funds by .0526.
Yes ___ No ___	Applicant has chosen Option B – federally approved indirect cost rate method and documentation on file? Administrative costs budgeted include the following: (1) indirect costs such as legal staff, central management and support functions; (2) costs for financial, accounting, audit, internal evaluations, and contracting functions; (3) costs for insurance that protects the entity that operates the project; and (4) the portion of the salaries and benefits of the director and any other project administrative staff not attributable to the time spent in direct support of a specific project.
Yes ___ No ___	For all matching funds, the source(s), the type of contribution (cash or in-kind), the amount (or an estimate), and the intended purpose are clearly identified in the narrative. Is the total amount of cash and/or in-kind derived from private, state and local, and federal funds stated in the narrative?

2007-08 CALIFORNIA AMERICORPS APPLICATION PROGRAM EVALUATION PLAN

Program Name: _____

- [1] Describe your partnership's plan for evaluating your AmeriCorps program. Include how the partnership will be involved in the review and selection of the research question, who will be involved, when you will start the process.
- [2] Describe your program's anticipated evaluation question(s). If you have not selected a question, indicate possible areas, and when you anticipate the question will be selected.
- [3] Describe your program's potential methods for evaluation. Include methods that are under consideration, or when you anticipate methods will be determined.
- [4] Indicate the period of time the evaluation will cover. Consider time for data collection, compiling, analyzing, reporting, reviewing, and disseminating. Please note the following timeframe:
Year 1 2007-08 – Awarded AmeriCorps Program start date--September 2007
Year 2 2008-09
Year 3 2009-10 – Final Evaluation Report due October 2009, with the AmeriCorps recompetite application.
- [5] Describe who will conduct the evaluation, or how you will select an evaluator. Address the issue of objectivity.
- [6] Discuss how the evaluation will be funded.

INSTRUCTIONS: PROGRAM EVALUATION PLAN

All Applicants are required to submit an evaluation plan as part of their application packet. For more information on evaluation requirements, see pages 42-43 of the RFA.

Complete the Program Evaluation Summary to outline your partnership's plan for evaluating your AmeriCorps program. In your description, include a discussion about your partnership's process, your program's anticipated evaluation question(s), potential methods to be used, period of time the evaluation will cover, who will conduct the evaluation, and how the evaluation will be funded.

Include a description of how you will select an evaluator (internal or external) and how you will assure objectivity.

CSC is considering the possibility of conducting a statewide AmeriCorps evaluation. In the event that CSC does decide to conduct an evaluation, all AmeriCorps programs will be expected to participate and will **not** be required to submit an individual evaluation.

INSTRUCTIONS: PROGRAM EVALUATION SUMMARY

A program evaluation summary is only required for previously funded and recompeting programs, if available.

Provide a copy of the executive summary from all evaluations of your AmeriCorps program for any of the past three completed program years. Include only one copy of the executive summary attached to the original application. CSC may request copies of the full evaluation at a later date.

INSTRUCTIONS: FINANCIAL/AUDIT INFORMATION

Provide your most recent A-133 audit, your organization's financial audit, or other financial statements if you have not had a formal audit.

The A-133 audit is a requirement for legal applicant agencies/organizations that expended \$500,000 or more in federal funding during the most recent fiscal year as outlined in federal Office of Management and Budget (OMB) Circular A-133. If you do not meet this criterion, you must include a letter to this effect in your completed application packet.

OMB Circular A-133 explicitly references – and is applicable to – organizations such as municipal and city governments, school districts, institutions of higher education and nonprofit organizations. Such organizations are not exempt from A-133 provisions and are required to submit audits if they meet the above criteria.

State of California government agencies that are covered by the Single Audit Act are not required to submit audits.

ASSURANCES AND CERTIFICATIONS

Instructions

By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Assurances and Certifications described below.

a) Inability to certify

Your inability to provide the assurances and certifications listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

b) Erroneous certification or assurance

The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

c) Notice of error in certification or assurance

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

d) Definitions

The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntarily excluded” as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. An applicant shall be considered a “prospective primary participant in a covered transaction” as defined in the rules implementing Executive Order 12549. You may contact us for assistance in obtaining a copy of those regulations.

e) Assurance requirement for subgrant agreements

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

f) Assurance inclusion in subgrant agreements

You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

g) Assurance of subgrant principals

You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

h) Non-assurance in subgrant agreements

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

i) Prudent person standard

Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

ASSURANCES

As the duly authorized representative of the applicant, I certify, (to the best of my knowledge) and belief, that the applicant:

1. Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of program costs) to ensure proper planning, management, and completion of the program described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with all rules regarding prohibited activities, including those stated in applicable NOFA or NOFO, grant provisions, and program regulations, and will ensure that no assistance made available by the Corporation will be used to support any such prohibited activities.
6. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
7. Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of handicaps (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990 or the Domestic Volunteer Services Act, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
8. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for program purposes regardless of federal participation in purchases.
9. Will comply, as applicable, with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.
10. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. 276a and 276a-7), the Copeland Act (40 U.S.C. 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for federally assisted construction sub-agreements.
11. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
12. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of program consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
13. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
14. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification, and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

15. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
16. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
17. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
19. Will comply with all the requirements of Subpart C of 45 CFR Part 2542, implementing E.O. 1259, regarding restrictions on doing business with suspended, debarred, and otherwise disqualified entities.
20. Will comply with all the requirements for providing a drug-free workplace on a continuing bases as set out in Subpart B of 45 CFR Part 2545, implementing sections 5151-5160 of the Drug-Free Workplace Act of 1988 (P.L. 100-690).
21. Will provide, in the design, recruitment, and operation of any AmeriCorps program, for broad-based input from – (1) the community served and potential participants in the program; and (2) community-based agencies with a demonstrated record of experience in providing services and local labor organizations representing employees of service sponsors, if these entities exist in the area to be served by the program;
22. Will, prior to the placement of participants, consult with the appropriate local labor organization, if any, representing employees in the area who are engaged in the same or similar work as that proposed to be carried out by an AmeriCorps program, to ensure compliance with the nondisplacement requirements specified in section 177 of the NCSA;
23. Will, in the case of an AmeriCorps program that is not funded through a State, consult with and coordinate activities with the State Commission for the State in which the program operates.
24. Will comply with all applicable requirements of all other federal laws, executive orders, regulations, application guidelines, and policies governing this program.

CERTIFICATIONS

1. Lobbying (Activities)

As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

- (a) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, renewal, amendment or modification of any federal grant, or cooperative agreement;
- (b) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all tiers (including subawards, subgrants, contracts under grants and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

2. Compliance with the Lobbying Disclosure Act of 1995. As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that neither the undersigned nor any of its operating sites is an organization described in Section (501)c(4) of the Internal Revenue Code of 1986, 26 U.S.C. § 501c(4) that engages in lobbying activities.

2007-08 CALIFORNIA AMERICORPS APPLICATION

APPLICATION CHECKLIST



A complete 2007-08 AmeriCorps application package consists of the following components **IN THE FOLLOWING ORDER**

1. ☐ **State Title Pages:** Complete online, print and include with application
2. ☐ **Table of Contents:** Include page numbers
3. ☐ **Executive Summary:** Not to exceed one-page, single-spaced
4. ☐ **AmeriCorps Program Accomplishment and Impact Summary**
(if applicable) (numbered X of Y)
5. ☐ **AmeriCorps Program Narrative:** Not to exceed 25 pages (numbered X of Y), double-spaced in Times New Roman, 12-point font size
6. ☐ **Performance Measure Worksheets**
7. ☐ **CLASP Partners Forms:** Complete online (do not print or include with application – CSC will print a report from your online submission)
8. ☐ **Budget Form** (numbered X of Y)
9. ☐ **Budget Narrative** (numbered X of Y)
10. ☐ **Budget Analysis Checklist**
11. ☐ **Program Evaluation Plan**
12. ☐ **Program Evaluation Summaries** (if applicable)
13. ☐ **Financial Audit/Information**

Please include 1 original and 7 copies of the application package, except for items 10, 12 and 13 (please include only one copy of these items attached to the original).

Do **not** include this checklist with your application.

Collate your copies using binder clips. Do not staple or use any other form of binding (folders, spiral binding, etc.) for your application. Failure to comply with these conditions may result in rejection of your application.

All applications must be **received by 5:00 p.m.** on Friday, October 27, 2007 at the following address:

California Service Corps
ATTN: AmeriCorps 2007
1110 K Street, Suite 210
Sacramento, CA 95814
(916) 323-7646 phone